



#4

PATENT
Docket: P-8777

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Stadler et al) Art Unit: 3762

Serial No.: 09/814,251) Examiner:

Filed: March 21, 2001)

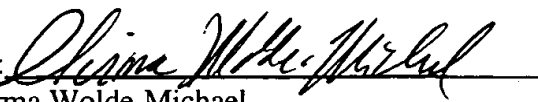
For: METHOD AND APPARATUS FOR DETECTION AND TREATMENT OF
TACHYCARDIA AND FIBRILLATIONRECEIVED
JUN 25 2001
TECHNOLOGY CENTER R3100INFORMATION DISCLOSURE STATEMENTAssistant Commissioner for Patents
Washington D.C. 20231

Dear Sir:

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with C.F.R. §§ 1.97 *et. seq.*, the materials enclosed herewith are brought to the attention of the Examiner as possibly being of interest in connection with the above-identified patent application.

Consideration of each of the documents listed on the attached Form 1449 is respectfully requested. Pursuant to the provisions of M.P.E.P. §609, Applicant further requests that a copy of the Form 1449, marked as being considered and initialed by the Examiner, be returned with the next Official Communication.

Respectfully submitted,

By: 
Girma Wolde-Michael
Attorney for Applicants
Registration No. 36,724MEDTRONIC, INC.
7000 Central Avenue Northeast
Minneapolis, Minnesota 55432
Telephone: (763) 514-6402

3782

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
INFORMATION DISCLOSURE STATEMENT TRANSMITTAL

In re Application of: Stadler et al
 For: METHOD AND APPARATUS FOR DETECTION AND TREATMENT OF TACHYCARDIA AND FIBRILLATION
 Serial No.: 09/814,251
 Filed: March 21, 2001



CERTIFICATE OF MAILING UNDER 37 CFR 1.8: I hereby certify that this **INFORMATION DISCLOSURE STATEMENT** and the paper(s), as described herein, are being deposited in the U.S. Postal Service, as first class mail, addressed to the Commissioner of Patents and Trademarks, Washington, D.C. 20231 on this 18 day of June, 2001.


 Signature
 Jennifer Bommentre
 Printed Name

Commissioner of Patents and Trademarks
 Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

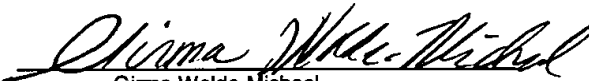
- X Information Disclosure Statement Transmittal
- X Information Disclosure Statement
- X PTO FORM 1449
- X Copies cited references
- X Return Postcard

FEE CALCULATION

- X \$ 00.00 Pursuant to 37 CFR §1.97(b)
- ☐ \$ 00.00 Pursuant to 37 CFR §1.97(c) with Certification
- ☐ \$ 00.00 Pursuant to 37 CFR §1.97(e) with Certification
- ☐ \$180.00 Pursuant to 37 CFR §1.97(c) without Certification
- ☐ \$180.00 Pursuant to 37 CFR §1.97(d) with Certification

- ☐ Applicant hereby petitions for a _____ months' extension of time. If an additional extension of time is required, please consider this petition therefor.
- X Applicant believes that no extension of time is required. However, if an extension of time is required, please consider this a petition therefor to provide for the possibility that applicant has inadvertently overlooked the need for an extension of time.
- X Please charge any additional fees or credits to Deposit Account No. 13-2546 which may have been overlooked with regard to this filing. A duplicate of this transmittal is enclosed.

06/18/01
 Date


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